

TRAVEL EXPENSE CLAIM

STD. 262 (REV. 9/2007)

See Instructions and "Privacy
Statement On Reverse Side* Please Send check to
home address *

Page 1 of 3 Pages

CLAIMANT'S NAME		SSN or EMPLOYEE NUMBER*		DEPARTMENT Office of the State CIO	
POSITION Chief of Staff		CB/ID No.		DIVISION or BUREAU OCIO	
RESIDENCE ADDRESS *		HEADQUARTERS ADDRESS 1325 J Street, Suite 1600		INDEX NUMBER (916) 319-9223	
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
			Sacramento	CA	95814

(1) NORMAL WORK HOURS

0800-1700

(2) PRIVATE VEHICLE LICENSE NUMBER

1

(3) MILEAGE RATE CLAIMED

0.585

(4) MONTH/YEAR		(6) LOCATION WHERE EXPENSES WERE INCURRED	(7) LODGING	(8) MEALS			(9) INCIDENTALS	(10) TRANSPORTATION					(11) BUSINESS EXPENSE	(12) TOTAL EXPENSES FOR DAY
(5) DATE TIME				BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE			
											MILES	AMOUNT		
4/19	0800 1900	Sacramento to Squaw Valley			10.00			PC		203.00	118.76		128.76	
4/20	1500 2300	Sacramento to San Francisco						SC	18.00		0.00		18.00	
											0.00		0.00	
											0.00		0.00	
											0.00		0.00	
											0.00		0.00	
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											0.00		0.00	
											0.00		0.00	
											0.00		0.00	
											0.00		0.00	
											0.00		0.00	
(13) SUBTOTALS			0.00	0.00	0.00	10.00	0.00	0.00		18.00	203.00	118.76	0.00	146.76

COLUMN CODE (ACCTG. USE ONLY)

CLAIM TOTAL

\$146.76

(14) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)

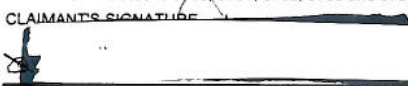

4/19 Went to Squaw Valley to meet with Rural and Urban CIOs.

4/20 Went to San Francisco in the state car to attend meeting with Chris Vein, CIO of city and county of SF with Secretary Takai (State CIO). Expenses include bridge tolls and parking.

AGENCY ACCOUNTING OFFICE
USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER

(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage.

CLAIMANT'S SIGNATURE 	DATE 5.12.09	(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT 	DATE 5-13-09
(17) SPECIAL EXPENSE AUTHORIZATION - SIGNATURE and TITLE (See Item 17 on reverse)			DATE

APRIL 19,
TO SQUAW VALLEY TO MEET WITH
RURAL AND URBAN CLOS.

203 MILES IZENDTRIP



DISPLAY FACE UP ON DASH RECEIPT

TOWER VALET PARKING

491 HAYES ST
(415) 341-1592

Machine Serial #:000005071046

EXPIRY DATE AND TIME

EXP 04:28am
APR 21,2009

EXP 04:28am

APR 21,2009

TICKET# LOT#
00019864 00000010

C \$0010.00 MACH# 001
FOLLOW INSTRUCTIONS ON SIGNS POSTED

LOT# 00000010
MACH# 001
TIC# 00019864
C \$0010.00
APR20,2009
06:28pm
Purchase Time

Total Paid: \$10.00 total \$10.00

COMPACT \$10.00

630 MISSION ST # LL
SAN FRANCISCO, CA 94105
*** SF TAX INCLUDED ***

DISPLAY FACE UP ON DASH RECEIPT

TRIP TO S.F. TO
MEET WITH
CHRIS VEIN, CIO
CITY & COUNTY OF
S.F.

4/20/09

TOLL RECEIPT

California Department of Transportation

CALTRANS - ATCAS
Benicia-Martinez Toll Bridge

Thank You!!

04/02/09 19:19:15 LANE: 03 ID: 517
CLASS: 12 \$ 4.00 CASH

TOLL RECEIPT

California Department of Transportation

SF - Oakland Bay Bridge

Please Don't Drink & Drive!!

04/20/09 17:54:55 LANE: 13 ID: 104
CLASS: 12 \$ 4.00 CASH